SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the

	FOR LINE NUMBER:						PAGE	_ 4	12	OF	48	3
(check only one)												
		X	11a		11b		11c		12			
			13		14		15		16		1	7

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) RED ROCK RESORTS, INC. PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name BRITT, MICHAEL, , , Date of Receipt Mailing Address 9 TAPADERO LANE 18 2019 City Zip Code State Transaction ID: INCA21223 NV LAS VEGAS 89135 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FERTITTA ENTERTAINMENT LLC VP OF GOVERNMENT RELATIONS Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. FERTITTA, III, FRANK J., , , Date of Receipt Mailing Address 1505 SOUTH PAVILION DRIVE 06 18 2019 City State Zip Code Transaction ID: INCA21225 LAS VEGAS NV 89135 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FERTITTA ENTÉRTAINMENT LLĆ CHAIRMAN AND CEO Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 5000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. FERTITTA, JILL ANN, , , Date of Receipt Mailing Address 1505 SOUTH PAVILION CENTER DRIVE 18 2019 City Zip Code State Transaction ID: INCA21226 NV LAS VEGAS 89135 Amount of Each Receipt this Period FEC ID number of contributing C 5000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **HOMEMAKER** N/A Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) 10250.00 SUBTOTAL of Receipts This Page (optional).....

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